

APR 04 2006

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# Fax

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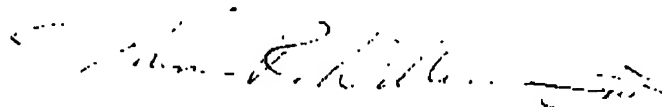
**To Whom It May Concern:**

Please change the correspondence address on the attached change of power of attorney forms for

U.S. Appl. Ser. No. 10/674,758, inventor Pamela Hardison, filed September 30, 2003, and

U.S. Appl. Ser. No. 11/121,607, inventors William H. Fennell and Lavonne Ennis (two forms), filed May 5, 2005, as noted. Thank you.

Best regards,

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PTO/SB/02 (01-06)

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<b>REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS</b>	Application Number	10/674,755
	Filing Date	September 30, 2003
	First Named Inventor	Harrison, Pamela
	Art Unit	3764
	Examiner Name	Not yet assigned
	Attorney Docket Number	06-0320-PHA

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number: 29043

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with Customer Number: 29043

OR

☒ Firm or Individual Name: Pamela HARRISON

Address: 9443 Peabody Ct.

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Telephone: (C) 561-809-9866 Email: PHARRISON@AOL.COM

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Signature: Pamela Harrison

Name: Pamela Harrison

Date: 4/3/06 Telephone: (C) 561-809-9866

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.

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